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Pneumococcal conjugate is probably one of the most cost-effective vaccines available: Ramanan Laxminarayan

India has the highest burden of pneumococcal pneumonia in the world.

Shahid Akhter ETHealthWorld August 06, 2019, 08:32 IST



Shahid Akhter, editor, ETHealthworld spoke to [Ramanan Laxminarayan](#), Senior research scholar at **Princeton University** to know more about challenges and the way forward in [immunisation](#) programme.

Government's immunisation efforts: Your views

The Indian Government launched a program to strengthen routine immunization in 2014, which was a landmark effort because until then immunization coverage had been fairly static for a long period of time. And since then quite a few things have happened. One is the introduction of four new vaccines against -- the Pentavalent Vaccine which had already been introduced prior to then but then there was a pneumococcal vaccine that was introduced, rotavirus and the inactivated polio virus vaccine (IPV) and the fourth was the measles-rubella vaccine. These were all introduced towards sort of the beginning of this current government, the previous iteration of it. And subsequently, a program called mission 'Indradhanush' was launched which was to increase immunization coverage across India, going in stages, 200 districts at a time. And all of these have had the effect of increasing immunization coverage in this country by about eight to ten percentage points, which is actually remarkable if you think about the number of children involved.

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Immunisation: why should the government prioritize?

Immunization is probably the most basic thing that the government owes its citizens because starting from the time of birth the immunization program essentially protects children from early death, before the age of five. This along with adequate nutrition are the main things that both prevent early child death but also help later on in life. Some of the research that we've done shows that immunization is responsible for increased schooling, increased cognition and increased wages later on in life. Now, most other countries have achieved ninety+ percentage of full immunization coverage, India has always lagged behind and now its really time to catch up.

Immunisation: health Inequity

Immunization is fundamentally a health inequity problem because the people who

are not covered by routine immunization right now are essentially people who are poor, people living in geographically remote areas where the program does not reach them. So, if we were to increase immunization coverage, we would automatically be reaching people who were underprivileged and live in remote areas. But let me also remind you that not all of the folks who are un-immunized live in remote areas. Many of them live right under our nose, in slums in urban areas. In fact, one of the interesting things in India is that rural immunization rates have converged now with urban immunization rates. So, a lot of un-immunized are essentially the poor people you find around fly-overs, people who you encounter in the streets in the metros. These are the bulk of our un-immunized children as well, at this point.

Pneumococcal Conjugate Vaccine: India

Now the [pneumococcal conjugate](#) vaccine is probably one of the most [cost-effective vaccines](#) available to us because there are still around a hundred and eighty thousand deaths every year attributable to this, pneumococcal pneumonia. And India has the highest burden of pneumococcal pneumonia in the world. We believe that probably half of these could be addressed through a pneumococcal vaccine. So, there is a large number of deaths that can be averted by increasing the coverage but on top of that pneumococcal pneumonia is also responsible for a lot of unnecessary antibiotic use which then leads to drug resistance. Now, India introduced the pneumococcal conjugate vaccine in the routine immunization program - what we call the universal immunization program or UIP -only a couple of years ago. This was funded by the Gavi Alliance but even today because of a variety of reasons including vaccine shortages, the immunization coverage with PCV remains really low. It's under five per cent. Now, this has to be fixed right away because by not immunizing children against PCV we are unnecessarily putting their lives at risk, we are putting them at a risk for hospitalization and ofcourse we are causing them to have a higher chance of dying. So, to me, this an urgent priority.

We are left with two years of eligibility for the Gavi funding but India could easily afford the pneumococcal vaccine. So, the increased cost to us of the pneumococcal vaccine is just about two thousand crores. Now, if you consider the fact that our routine immunization program costs about nine thousand crores and this is an expensive vaccine, you know, the immediate hit is not that much. And you also have to remember that over time we will have the Indian made version of this vaccine which will also drive down the cost dramatically both for India as well as for the world. But as a matter of urgency, the pneumococcal vaccine is the most important thing we should be focusing on right now.

The Indian vaccines have not entered the market yet so it will take at least another

two years, maybe three years to enter the market.

Immunisation: Indian's approach

India has, especially under the current government placed a lot of emphasis on immunization. So, immunization is one of the primary objectives of the government even prior to when 'Ayushman Bharat' then 'Swachh Bharat' came about. That said, we still have a long way to go. I don't think we can rest until we have full immunization coverage up at ninety per cent which was the stated goal for the end of 2018, and we didn't achieve that goal. So, we have to achieve that goal. We have to put a lot more money towards immunization. Currently, we spend just about four dollars for a fully immunized child. This is actually one of the lowest levels in the world, even compared to our neighbours. Most of the neighbours spend anywhere from five to twelve dollars. Now, admittedly the cost of our program is a little lower because we are able to negotiate better prices for our vaccines, but we are not spending enough on the system that delivers the vaccines. We are not incentivizing people who are providing these vaccines. And at the end of the day, I don't think the mothers and the mother-in-laws in this country really understand how important immunization is. And that's where we need to change the minds of people and we have to really focus on this.

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